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CONFIRMATION NO. 8194

<b>SERIAL NUMBER</b> 10/764,419	<b>FILING OR 371(c) DATE</b> 01/23/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3766	<b>ATTORNEY DOCKET NO.</b> VT0282-US4
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**APPLICANTS**

Robert Turcott, Mountain View, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/208,081 07/29/2002 PAT 6,942,622 which is a CIP of 09/467,298  
 12/17/1999 PAT 6,480,733  
 which is a CIP of 09/438,017 11/10/1999 PAT 6,409,675

C4L 7/19/06

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

NONE C4L 7/19/06

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 04/30/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 44	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>Carl H. Fagan</u> Initials: <u>C4L</u>				

**ADDRESS**

24473

**TITLE**

Using photo-plethysmography to monitor autonomic tone and perform pacing optimization based on monitored autonomic tone

<b>FILING FEE RECEIVED</b> 1374	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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